## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

0987,0100000/EJK.

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
T7	TAL CLAIMS		(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	,	
TOTAL CLAIMS			3.6					RATE	FEE	4	RATE	FEE	
FC	)R		NUMBER FILED .		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
тс	TAL CHARGE	ABLE CLAIMS	36 minus 20=		· 16			X\$ 9=	144	OR	X\$18=		
INC	EPENDENT C	LAIMS	3 minus 3 =		*	0		X43=	0	OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	0	OR	+290=		
* If the difference in column 1 is less than zero, enter "0					"0" in c	column 2	L	TOTAL	599	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
		(Column 1)		(Column 2) (Column 3)			_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID I	BER DUSLY	PRESENT EXTRA		ŖATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL DDIT. FEE			TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)										ADDII. FEE		
В		CLAIMS		HIGH	EST		ÌГ		ADDI-			ADDI-	
AMENDMENT		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	lΓ	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>!</b>  -						
·							L	+145=		OR	+290=		
				<b>A</b> l	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE					
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	;	=		X43=		o'R	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	+145=		ر ا			
<b>+</b> 14	* If th entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in colu	umn 1.		

FORM PTO-875 (Rev. 10/03)